

DRK

RECEIVED-DNR

KOHLER

MAR 31 2014

DRINKING WATER & GW

March 26, 2014

Dear Ms. Lyons-Roehl:

**Re: Request to Increase Pumping Rate from Existing High Capacity Well # 62410, WUWN
BP307, High Capacity Well File No. 60-3-006
Kohler Power Systems, America
Town of Mosel, Sheboygan County**

The existing well on this industrial property was installed in 1961 by the Garton Toy Co. Kohler Co. acquired the property in the late 70s, and WDNR authorized in 1979 continued operation of the well under Kohler Co. ownership. Authorized operation is for 32,000 gpd via a 300 gpm pump. This well is the sole source of water (potable use in bathroom and kitchen areas, industrial use for manufacturing (rinse water, non-contact cooling water, boiler feed), and fire protection use) at the property.

This Kohler Power Systems facility is completing a building addition and manufacturing expansion and requests authorization to withdraw additional water from the well starting May 1, 2014, as described in the attached application, Form 3300-256. This request involves no change to the well installation or pump; it is solely to allow additional water use from the existing well with existing equipment.

Please contact Mike Cassidy at 920-457-4441, ext 77263, or via e-mail at mike.casidy@kohler.com, if you have any questions on this application.

Sincerely,



Mike Kelm
EHS Specialist

Wisconsin DNR – DG/5
Attn: Deb Lyons-Roehl
P O Box 7921
Madison, WI 53707-7921

Att: Completed Form 3300-256 (1 copy)
Check #0003431176 for \$500

cc: Mike Cassidy/EHS
File

RECEIVED-DNR

MAR 31 2014

DRINKING WATER & HIGH

State of Wisconsin
Department of Natural Resources
Private Water Systems Section - DG/2
dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant Well Approval Application

Form 3300-256 (R 7/05)

Page 1 of 6

Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR 811, Wis. Adm. Code. See NR 811.01, Wis. Adm. Code for applicability requirements.

Applicant Information

Application Prepared By (Name and Title) MICHAEL CASSIDY EHS SPECIALIST		Company KOHLER CO.	
Street Address 444 HIGHLAND DRIVE		City KOHLER	State ZIP Code WI 53044
Telephone Number 920 457 4441	Fax Number 920 459 1682	E-Mail Address mike.cassidy@kohler.com	

Property Ownership Information

Property owner, if different than applicant (Name of Person and Title) JOHN BRICKNER SUPERINTENDENT		Company KOHLER POWER SYSTEMS, AMERICAS	
Street Address N7650 COUNTY TRUNK LS		City MOSEL	State ZIP Code WI 53083
Telephone Number 920 457 4441	Fax Number 920 803 4976	E-Mail Address john.brickner@kohler.com	

Well Operator Information

Well operator if different than owner (Name of Person and Title) SAME AS OWNER		Company	
Street Address		City	State ZIP Code
Telephone Number	Fax Number	E-Mail Address	

Property Information

Enter the High Capacity Well File Number below if the property is already a high capacity property. If the property is not designated as a high capacity property at the time of application, enter "NONE." NOTE: Find the file number in upper right hand corner of the most recent high capacity well approval, or use the compact disk of departmental well data that is issued to drillers and pump installers. On the compact disk, see "File location" in red print in "Location" section. File number format is as follows: (1 or 2 digits for county) - (1 digit for well classification) - (1 to 4 digits for assigned property no.).

County SHEBOYGAN	Town MOSEL	High Capacity Well File No. 60-3-006
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Submittal Purpose

Check all that apply:

- ☐ Install one or more new wells with a capacity greater than 70 gallons per minute.
- ☐ Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Replace one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☐ Reconstruct one or more wells with a capacity greater than 70 gallons per minute.
- ☐ Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property.
- ☒ Increase pumping rate in one or more wells to a rate greater than previously approved. **NO NEW PUMP, EXISTING 300 GPM PUMP TO BE USED**
- ☐ Request continued operation of high capacity wells after a change in ownership. (No application fee required.)
- ☐ Renew a previous approval that has expired.
- ☐ Well (or wells) will serve a school or wastewater treatment plant. See definitions on page 5.
- ☐ Other, explain _____

Site Status Information

Determine the site status using the Internet or the compact disk of departmental well data that is issued to drillers and pump installers and the information supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/dws.htm. Enter YES or NO for each of the following questions.

YES NO

☐ ☒ Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO.

☐ ☒ Has there been a change in well ownership since the last approval was written?

If YES, name of current owner:

Date of purchase:

☐ ☒ Has there been a change in well operator since the last approval was written?

If YES, name of current operator:

Date of change:

☐ ☒ Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, include a schematic drawing showing backflow protection.

☐ ☒ Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections.

If YES, list the landfill site ID Number:

OR Landfill location: (Township/Range/Section)

☒ ☐ Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed:

SEE ATTACHED LIST☐ Open☒ Closed

☐ ☒ Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program:

☐ ☒ Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or Internet at maps.dnr.state.wi.us/imf/dnrimf.jsp?site=brts. If YES, list the BRRTS Number here:

☒ ☐ Is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5.

☐ ☒ Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office.

☐ ☒ Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued?

☐ ☒ Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO.

☐ ☒ Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use?

☐ ☒ Will the well discharge directly to a storage pond?

☒ ☐ Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use?

☐ ☒ Is a proposed well within 1,200 feet of a quarry?

☐ ☒ Is a proposed well located in a floodplain or floodway?

☐ ☒ Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code?

☐ ☒ Will the well be used as a source of bottled water?

☐ ☒ Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?

☐ ☒ Is the property served by a community water system?

Attachment to Form 3300-256

Kohler Power Systems Americas
Town of Mosel, Sheboygan County

Page 2, Site Status Information, Item 6:

BRRTS #	Description	Status	Closure Date
02-60-212783	Kohler Generator Division D Line Footings	ERP - Closed	11/30/2010
03-60-005119	Kohler Generator Division Tank 26	LUST - Closed	11/11/1987
03-60-001926	Kohler Generator Division Tank 27	LUST - Closed	12/2/2004
03-60-005120	Kohler Generator Division Tank 28	LUST - Closed	6/24/2005
03-60-001491	Kohler Generator Division Tank 29	LUST - Closed	7/5/2005
03-60-004022	Kohler Generator Division Tank 43	LUST - Closed	6/24/2005
03-60-154131	Kohler Generator Division NW Corner Spill	LUST - Closed	10/11/2004
04-60-193781	Kohler Generator Division Spill	SPILL - Closed	10/28/1994
04-60-050594	Kohler Generator Division Spill	SPILL - Closed	4/20/1995
04-60-212780	Kohler Generator Division Spill	SPILL - Closed	1/22/1999
04-60-553094	Kohler Generator Division Spill	SPILL - Closed	1/9/2009
04-60-556361	Kohler Generator Division Spill	SPILL - Closed	11/23/2010
04-60-561316	Kohler Generator Division Spill	SPILL - Closed	6/10/2013

Existing Well Information

Enter the following information on all existing wells on the property, if more than four wells, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):	KOLLER CO. GENERATOR PLANT			
Well Number Assigned by Owner (001, 002, etc.):	#1			
WI Unique Well Number or NA if no number:	BP 307			
Permanent DNR High Capacity Well Number or N/A if none:	62416			
Public Water System ID Number, if Public (if not public, NONE):	NONE			
Potable or Non-Potable Use:	POTABLE			
Type of Well (Irrigation, Industrial, Residential, etc.):	INDUSTRIAL			
Requested Average Water Usage per Day in Gallons:	45,000			
Requested Maximum Water Usage per Day in Gallons:	95,000			
Seasonal? (April to October, Year Around, etc.):	YEAR ROUND			
Approved Pumping Capacity if Previously Approved (gpm):	25			
Current Pump Type & Capacity (gpm):	VERTICAL TURBINE 300			
Proposed Pump Type & Capacity If Change Requested (gpm):	NO CHANGE REQUESTED			
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	OVER TOP OF CASING			
Discharge Location (Building Pressure Tank, Pond, etc.):	4500-GAL PRESSURE TANK			
Height of Well Casing Above Ground in Inches:	18			
Potential Contaminant Sources and Distance:	N/A, see p. 6			
Well Loc: Quarter Quarter Section	NE 1/4 of NE 1/4	1/4 of 1/4	1/4 of 1/4	1/4 of 1/4
or Government Lot Number				
Section or French Long Lot No.	33			
Township:	T 16 N	T N	T N	T N
Range (Select E or W):	R 23 E	R E	R E	R E
Latitude (Degrees and Minutes)	43° 49.077'			
Longitude (Degrees and Minutes)	87° 44.145'			
GPS Map Datum (WGS84, WTM91, etc.)				
Include as much of the following information as practical for wells that do not have well construction records attached to the application, however if the well construction record is attached, applicant may leave the following rows blank.				
Date of Construction:	1961			
Drilled by (Name of Drilling Firm):	SEE WELL			
Drilling Method(s) (Rotary, Percussion, Etc.):	CONSTRUCTION REPORT			
Well Depth in Feet:				
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	inches, feet	inches, feet	inches, feet	inches, feet
Lower Drillhole Diameter in Inches and Depth in Feet:	inches, feet	inches, feet	inches, feet	inches, feet
Well Casing Diameter in Inches and Depth in Feet:	inches, feet	inches, feet	inches, feet	inches, feet
Well Casing Material and Wall Thickness:				
Annular Space Material Between Casing and Drillhole Wall:				
Is There a Well Screen (Y or N) If so, Screen Material?:				

Proposed Well Information

Enter the following information on all proposed wells on the property, if more than two wells or alternate construction, submit additional sheets:

Well Name Assigned by Well Owner (North Well, etc.):		
Well Number Assigned by Owner (001, 002, etc.):		
Well Loc: Quarter Quarter Section or French Long Lot Number	1/4 of 1/4 of Section	1/4 of 1/4 of Section
or Government Lot Number		
Township & Range (Select E or W)	T N, R <input type="checkbox"/> E <input type="checkbox"/> W	T N, R <input type="checkbox"/> E <input type="checkbox"/> W
Latitude (Degrees and Minutes)	° ' "	° ' "
Longitude (Degrees and Minutes)	° ' "	° ' "
GPS Map Datum (WGS84, WTM91, etc.)		
Type of Well (Irrigation, Industrial, Residential, etc.):	Type: <input type="checkbox"/> Potable <input type="checkbox"/> Non-Potable	Type: <input type="checkbox"/> Potable <input type="checkbox"/> Non-Potable
Drilling Method(s) (Rotary, Percussion, Etc.):		

Anticipated Geological Materials and Depths that Are Expected During Drilling:

Material and Depth Interval:	from 0' to ' "	from 0' to ' "
Material and Depth Interval:	from ' to ' "	from ' to ' "
Material and Depth Interval:	from ' to ' "	from ' to ' "
Material and Depth Interval:	from ' to ' "	from ' to ' "
Material and Depth Interval:	from ' to ' "	from ' to ' "

Drillhole Diameter and Anticipated Depth Intervals:

Diameter and Depth Interval:	from ' to ' "	from ' to ' "
Diameter and Depth Interval:	from ' to ' "	from ' to ' "
Diameter and Depth Interval:	from ' to ' "	from ' to ' "

Permanent Casing or Liner Diameter and Wall Thickness at Anticipated Depth Intervals:

Diameter and Wall Thickness at Depth Interval:	" diam/ " thick 0' to ' "	" diam/ " thick 0' to ' "
Diameter and Wall Thickness at Depth Interval:	" diam/ " thick ' to ' "	" diam/ " thick ' to ' "

Permanent Casing or Liner Material, If Used:

Casing Joints (Welded, T and C, etc.)		
Material and Weight at Depth Interval:	/ lbs/foot 0' to ' "	/ lbs/foot 0' to ' "
Material and Weight at Depth Interval:	/ lbs/foot ' to ' "	/ lbs/foot ' to ' "
Screen Material, Slot Size in Inches and Depth Interval or N/A if none:	/ " / ' to ' "	/ " / ' to ' "
Casing to Screen Joint (Welded, T and C, K Packer, etc.)		

Annular Space Material Including Filter Pack Material, If Used:

Material and Depth Interval:	/ 0' to ' "	/ 0' to ' "
Material and Depth Interval:	/ ' to ' "	/ ' to ' "

Proposed Average Water Usage Per Day in Gallons:	
Proposed Maximum Water Usage Per Day in Gallons:	
Seasonal? (April to October, Year Around, etc.):	
Proposed Pump Type & Capacity (gpm):	
Discharge Type (Over Top of Casing Seal, Pileless Adapter or Unit):	
Discharge Location (Building Pressure Tank, Pond, etc.):	
Distance and Direction to Nearest Public Utility Well & Well Name:	
Distance to Other Potential Contaminant Sources:	
Distance to Other Potential Contaminant Sources:	
Leave Blank, for Department use only	

Required Attachments

1. Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pilotless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

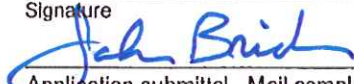
Name - Print

JOHN BRICKNER

Check Box

☒ Owner☐ Agent of the Owner

Signature



Company

KOHLER POWER SYSTEMS AMERICAS

Date

3-26-14

Application submittal. Mail completed application and payment with all required attachments to DNR, Private Water Systems Section - DG/2, PO Box 7921, Madison WI 53707-7921.

Definitions from Wisconsin Administrative Codes

"High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)]

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

Other Information

Use for schematic drawings, sketch maps or other information.

Per page 5, Item 2:

The existing well is on the west side of the building. It is hydraulically upgradient of the building structure as ground water flows to the east, toward Lake Michigan.

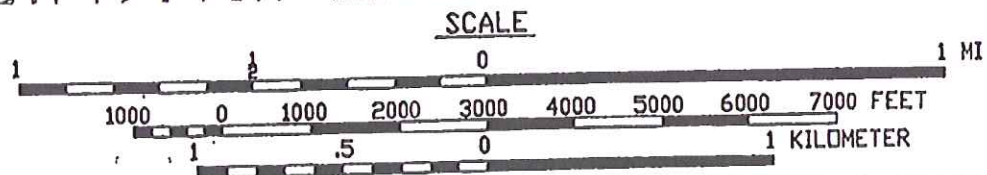
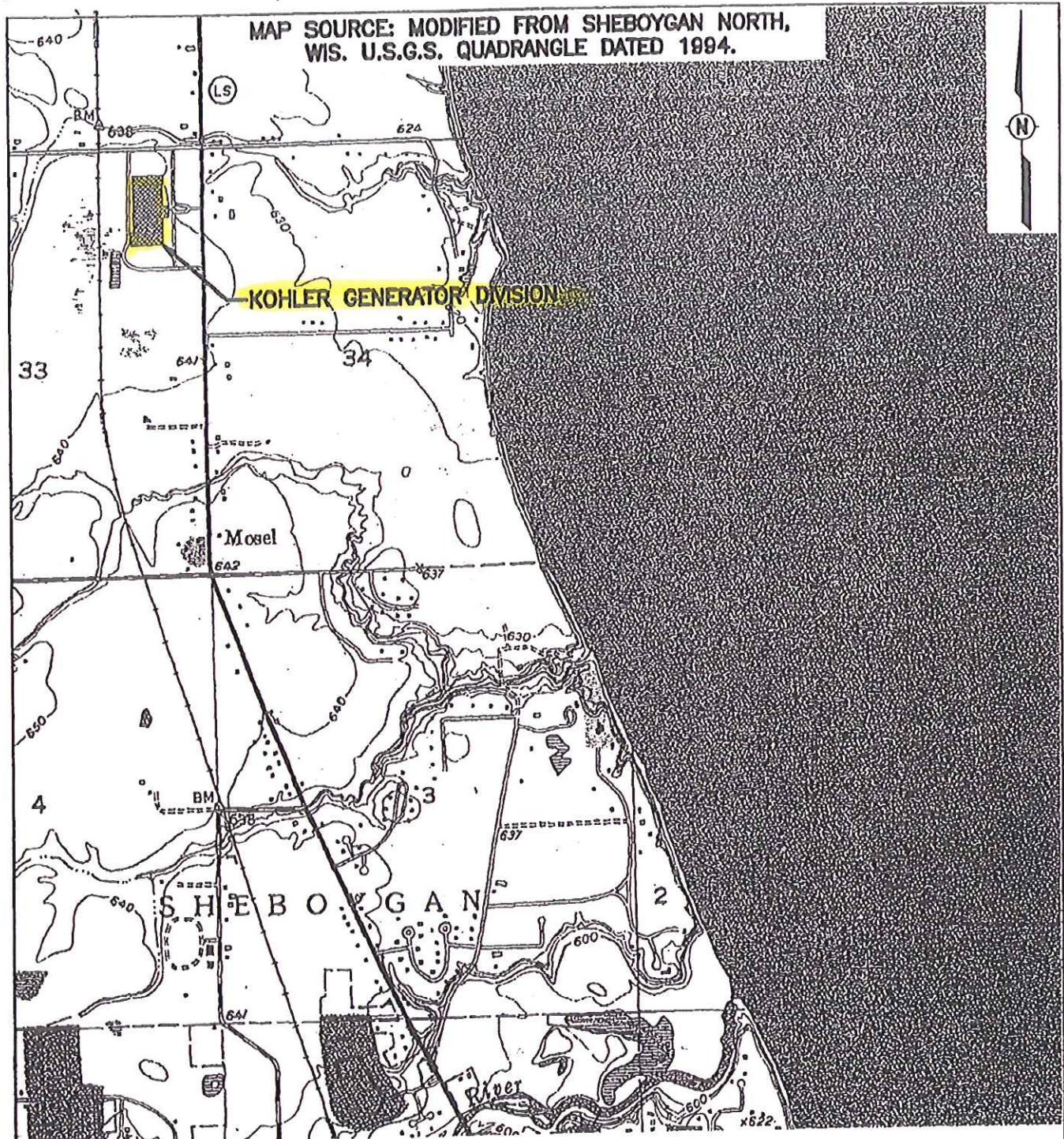
The well is approximately 300 feet south of two fuel USTs.

The well is 110 feet west of BRTS site 02-60-212783.

The well is approximately 100 feet west of the nearest storm sewer line.

The well is approximately 500 feet north of the nearest treated sanitary sewer line from the outlet of the three aerated sanitary lagoons. It is more than 500 feet from the nearest untreated sanitary sewer line going into the lagoons.

X:\PROJECTS\687566WADwg\G587566wa SITE_LOCATION_MAP_fig001.dwg, FIG 1, 5/25/2004 10:58:14 AM, reince



STS CONSULTANTS
1035 Kepler Drive
Green Bay, WI 54311
920-468-1978
www.stsconsultants.com
Copyright © 2004, By: STS Consultants, Ltd.

SITE LOCATION MAP
KOHLER COMPANY GENERATOR DIVISION
MOSEL, WISCONSIN

Drawn: JMR 05/14/04

Checked: RJM 05/14/04

Approved: RJM 05/14/04

PROJECT
NUMBER 87566WA

FIGURE
NUMBER 1

Well Construction Report For WISCONSIN UNIQUE WELL NUMBER BP307		
Property Owner GARTON TOY COMPANY		Telephone -- Number
Mailing Address CTH LS		
City SHEBOYGAN		State WI Zip Code 53081
County of Well Location Sheboygan	County Well Permit No. W	Well Completion Date 09/01/1961

State of WI - Private Water Systems - DG/2
Department of Natural Resources, Box 7921
Madison, WI 53707

Form 3300-77A
(R 8/00)

Please type or Print using a black Pen
Please Use Decimals Instead of Fractions.

Well Constructor (Business Name) LAYNE CHRISTENSEN COMPAN		License # 582	Facility ID Number (Public Wells) 460050360
Address W229 N5005 DUPLAINVILLE		Public Well Plan Approval # W--	
City PEWAUKEE	State WI	Zip Code 53072	Date of Approval (mm/dd/yyyy)
Hicap Permanent well # 62410	Common Well #	Specific Capacity 132.4 gpm/ft	

1. Well Location <input type="checkbox"/> Town <input checked="" type="checkbox"/> City <input type="checkbox"/> Village of SHEBOYGAN	Fire # (if available)
--	-----------------------

Grid or Street Address or Road Name and Number N7650 CTH LS

Subdivision Name	Lot #	Block #
------------------	-------	---------

Gov't Lot #	or	NE 1/4 of	NE 1/4 of
Section 33	T	16 N; R 23	<input checked="" type="checkbox"/> E <input type="checkbox"/> W
Latitude Deg.	Min.		
Longitude Deg.	Min.		

2. Well Type <input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Reconstruction	Lat/Long Method GPS008
---	----------------------------------

of previous unique well #	constructed in
Reason for replaced or Reconstructed Well?	

3. Well serves # of homes and/or (e.g. barn, restaurant, church, school, industry, etc.)	High capacity Well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--

<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven Point <input type="checkbox"/> Jetted <input type="checkbox"/> Other:

4. Is the well located upslope or sideslope and not downslope from any contamination source, including those on neighboring properties?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

Well located within 1,200 feet of a quarry? ☐ Yes ☐ No If yes, distance in feet from quarry:

Well located in floodplain? ☐ Yes ☒ No

Distance in Feet from Well to Nearest:

1. Landfill
2. Building Overhang
3. Septic ☐ Holding Tank ☐
4. Sewage Absorption Unit
5. Nonconforming Pit
6. Buried Home Heating Oil Tank
7. Buried Petroleum Tank

9. Downspout/Yard Hydrant
10. Privy
11. Foundation Drain to Clearwater
12. Foundation Drain to Sewer
13. Building Drain
☐ Cast Iron or Plastic ☐ Other
14. Building Sewer ☐ Gravity ☐ Pressure
☐ Cast Iron or Plastic ☐ Other
15. Collector or Street Sewer:
☐ Sanitary units in. diam.
☐ Storm ☐ =< 6 ☐ > 6
16. Clearwater Sump

17. Wastewater Sump
18. Paved Animal Barn Pen
19. Animal Yard or Shelter
20. Silo
21. Barn Gutter
22. Manure Pipe ☐ Gravity ☐ Pressure
☐ Cast Iron or Plastic ☐ Other
23. Other Manure Storage
24. Ditch

8. Shoreline ☐ Swimming Pool ☐

25. Other NR 812 Waste Storage

5. Drillhole Dimensions and Construction Method			Lower
Dia (in.)	From (ft.)	To (ft.)	Open Bedrock
18	0	96	<input type="checkbox"/> ---1. Rotary - Mud Circulation----- <input type="checkbox"/>
			<input type="checkbox"/> ---2. Rotary - Air----- <input type="checkbox"/>
12	96	350.5	<input type="checkbox"/> ---3. Rotary - Air and Foam----- <input type="checkbox"/>
			<input type="checkbox"/> ---4. Drill-Through Casing Hammer
			<input type="checkbox"/> ---5. Reverse Rotary
			<input type="checkbox"/> ---6. Cable-tool Bit in. dia----- <input type="checkbox"/>
			<input type="checkbox"/> 7. Dual Rotary <input type="checkbox"/>
			<input type="checkbox"/> 8. Temp. Outer Casing in. dia. depth (ft.) Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, why not?

8.	Geology	From (ft.)	To (ft.)
--C-	CLAY	0	70
-BL-	BROKEN LIMESTONE	70	76
--L-	LIMESTONE	76	351.

6. Casing, Liner, Screen	Material, Weight, Specification	From (ft.)	To (ft.)
Dia (in.)			
18 STEEL		0	74.5
12 STEEL		0	96

9. Static Water Level ft. above ground surface 1 ft. below ground surface	11. Well is: <input checked="" type="checkbox"/> Above Grade 18 in. <input type="checkbox"/> Below Grade Developed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Capped? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10. Pump Test Pumping Level 4.8 ft. below surface Pumping at 503 GPM for 10 hours	

7. Grout or Other Sealing Material. Method	From (ft.)	To (ft.)	# Sacks Cement
Method: Kind of Sealing Material			
NEAT CEMENT	0	96	

12. Did you notify the owner of the need to permanently abandon and fill all unused wells on this property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, explain:	
13. Signature of the Well Constructor or Supervisory Driller	Date signed
Signature of Drill Rig Operator (Mandatory unless same as above)	Date signed

Make additional comments on reverse side about geology, additional screens, water quality, etc.

Variance issued ☐ Yes ☒ No